

COMPUTER ACCESS AGREEMENT

*Wm. Jennings Bryan Dorn VA Medical Center
6439 Garners Ferry Road
Columbia, SC 29209-1639*

As an authorized user of the Decentralized Hospital Computer Program (DHCP) at the Dorn VA Medical Center, I will be given access to the computer system to better perform the duties of my job. In exchange for this authorization:

I will safeguard the "Access Code", "Verify Code" and "Electronic Signature Code" given to me. I will also protect and safeguard any codes created by me in the future.

I am STRICTLY PROHIBITED from disclosing my codes to ANYONE, including my family, friends, fellow workers, supervisor(s), and subordinates, for ANY reason. However, I may be required to report and/or relinquish my Access codes to the Information Resource Management Service. I understand that I will be held accountable for all work/changes in the computer done under my access code and I understand that it is in my best interest not to have anyone access the computer through my codes. I understand that I must terminate any active sessions before leaving a terminal or microcomputer unattended to prevent others from gaining access under my codes.

I understand that the use of offensive or profane language will not be tolerated and will result in termination of my access to the system. It may also result in the appropriate disciplinary action upon the mandatory notification of my supervisor.

I will use my code to gain access to the computer system only for performing official duties.

I understand that under conditions where security violations are suspected, inquiries may be made in the computer about my access activities, including contents of my electronic mail.

I understand that the VA electronic mail is to be used for official government business only. I understand that electronic mail is not inherently confidential, and I have no guarantee of privacy when using electronic mail. I also understand that technical or administrative problems may require IRM support staff to view electronic mail.

I will refrain from illegal reproduction, installation or use of unlicensed computer software on any station microcomputers.

Information about an individual accessed by the computer is confidential and protected from disclosure by law (except for specific legal exceptions or with the individual's consent). Improper disclosure of information to anyone not authorized to receive it may result in a fine of \$5,000.00 under the Privacy Act of 1974.

I understand that in accordance with Medical Center Memorandum 544-1015, an employee may access a sensitive computer record only in the performance of his or her official duties.

I understand that violation of these provisions constitutes disregard of a direct supervisory order and may result in appropriate disciplinary action under VA Conduct Regulations (VAR 820(b)).

I affirm that I have read, understand, and agree to abide by the provisions and intent of this agreement, in all regards.

Name of Employee [Print] _____ SS# _____

Service _____

Signature _____ Date _____